SUPPLEMENT TO THE

BRITISH MEDICAL JOURNAL

LONDON SATURDAY OCTOBER 25 1941

POLICY AND WORK OF THE BRITISH MEDICAL ASSOCIATION

The Executive Committee of the B.M.A., which, since the war began, has undertaken a great many of the duties that would have been carried out by the Council had more frequent meetings of that body been possible, met on October 14 under the chairmanship of Mr. H. S. SOUTTAR.

Industrial Medicine

An excellent piece of wartime work was laid before the Executive in the shape of the report of the Industrial Health Committee, appointed by the Council in 1940 to consider industrial medical practice in the light of the existing medical system and to discuss the possibilities of future development. This special committee, which was strongly representative of industrial medical practice, and also had observers from the Ministries of Labour and of Supply, has now produced a report running to forty-five foolscap pages, which the Executive Committee highly praised, authorizing its immediate publication, and its presentation by deputation to the Minister of Labour as soon as possible. A synopsis of the report and its recommendations will in due course be published in the *Journal*.

One member of the Executive said that he was disappointed that collieries had not been included within the committee's ambit. The committee's reference, however, was to the places covered by the Factory Act, and the committee was not constituted as it would have been if collieries were to be taken within its purview. The member who raised the point said that he would propose to the Council at its next meeting (on December 10) that a similar piece of work should be undertaken for collieries.

Resolutions from the Recent Conference

The various resolutions of the recent Conference of Representatives of Home Divisions were passed in review. Most of them were referred to the appropriate committees—the Insurance Acts, Hospitals, and Public Health Committees, and the Journal Board (those relating to certification, remuneration, and other matters had already been dealt with at a meeting of the General Practice Executive Committee on October 7).

A matter which was considered at length was the proposal for Discussion Groups to be organized within the Divisions. The idea was unanimously favoured, but it was felt that unless they were given "something to bite on" the result might well be diffuse and nebulous. The suggestion which found favour was that some of the problems now under consideration by the committees of the Medical Planning Commission might be set out in concrete form for discussion in the Divisions.

The method of issuing a periodical letter to all members of the Association, not to Divisional secretaries only, was favoured. Hitherto this has not been done because it was felt that members should look to the *Journal* for such information, but in wartime, with the restriction of the *Supplement*, it was thought that a letter written at intervals by the Secretary might be useful in maintaining interest in Association affairs.

On the resolution concerning the allowances paid to practitioners enrolled in the E.M.S. in coastal areas, the Secretary said that he had been advised that representations from practitioners in the coast towns were being forwarded. Another resolution urged that the Government be requested to provide adequate free medical attention for the dependants of those in the Forces. The Secretary said that representations to this effect had previously been made, and it was agreed that further representations be made at once to all three Departments concerned with the fighting Services and to the Ministry of Health.

The Advisory Role of the C.M.W.C.

One resolution from the Conference asked the Council to approach the appropriate authorities in order to make it clear that the Central Medical War Committee and the Local Committees are responsible for the allocation of medical personnel for recruitment for the armed Forces and for all branches of the E.M.S. and civil defence. It was felt that there was still some misunderstanding as to the role of the committees. The responsibility of the Central Medical War Committee and the Local Committees is advisory. In general, the Ministry does consult the Central Committee before making appointments, but the bodies are only expected to advise on allocation. It is obvious that the Government could not divest itself of its ultimate responsibility.

On the resolution which drew attention to what was described as "a dangerous extent of depletion" of the civilian medical profession and advocated part-time civilian practitioners for employment with isolated Service units, it was stated that the Central Medical War Committee had advocated the employment of part-time practitioners, and was doing all it could in that direction. As to "dangerous depletion," the view expressed by some members of the Executive was that while this might not be an entirely accurate description, such depletion was not far distant.

On the subject of petrol rationing, the Secretary read a letter he had received from the Petroleum Board setting out a scheme for an allowance of extra petrol in emergency cases. It was considered that although a certain delay in the supply of such petrol was apparently inevitable, this new arrangement, details of which are given elsewhere in this *Supplement*, would meet the difficulty in most cases.

The reply of the Ministry of Labour to the demand for the reservation of doctors' maidservants was also considered satisfactory. It promised that any representations which the employer might make would receive careful consideration before any woman registered under the Order was called for interview, that full account would be taken of the importance of her work and its actual nature, and, if it was decided that release should be made, every assistance would be given to the employer to find substitutes.

The final matter to engage the attention of the Executive was concerned with the Association's building, the south wing of which has suffered damage from enemy action. This damage will further delay the completion of the building operations when it is possible for these to be undertaken.

EMERGENCY PETROL FOR SUBSTITUTE CARS

The recent Conference of Representatives of Home Divisions of the B.M.A. discussed the difficulty in which a doctor who uses two cars for his professional work is liable to find himself when one of the cars breaks down and all the petrol coupons allocated to the other car have been used—a predicament which might well occur towards the end of a rationing period. The suggestion was made that the doctor might be permitted to use his supplementary allowance of petrol in either car, and the Council of the Association was asked to investigate this possibility.

Representations have been made to the Petroleum Department, and the following reply has been received:

"The solution suggested to you from within your Association would be very embarrassing to us, and might also land the practitioner himself in fresh difficulties. The Petroleum Board has been whole-heartedly and most effectively co-operating with us in a campaign to discourage dealers from supplying petrol against coupons in which any irregularity appears; and coupons marked in the special

way required under the scheme proposed to you would almost certainly be regarded as suspect and refused by dealers.

The following alternative proposal seems to me better both from your point of view and from ours. We should be prepared to issue a circular to D.P.O.s giving formal authority for what we know to be their practice in emergency cases, that when a medical practitioner whose car has broken down asks by telephone, telegram, or in person for an emergency ration for another car which he proposes to use as a substitute, the D.P.O. may grant immediately a small emergency supply of coupons bearing the number of the substitute car, on an assurance from the practitioner concerned that he has in his possession coupons for the broken-down car at least equal to the emergency supply, and that he will return these as soon as possible with a written note of the circumstances.

The emergency practice to which I refer has not been confined by D.P.O.s to cases where the substitute car is the property of the applicant, and I do not propose to confine the formal authority to such cases: in other words, we should be prepared to make it applicable not only to those medical practitioners who have two cars of their own but to those who have only one and are compelled to borrow the substitute car from a colleague or a friend, provided in all cases that the emergency ration is sought only for a car used in substitution of one for which the applicant is receiving a supplementary ration and which has broken down."

The Department have been asked to issue the circular proposed in their communication, and it is hoped that this, although not an ideal solution, will go a long way towards meeting the difficulty.

MEDICAL WAR RELIEF FUND

TWENTY-FOURTH LIST

Previously acknowledged, £33,677 12*s.* 9*d.* *and* £100 3½% *Conversion Stock, and* £40 3% *Defence Bonds*

Individual Subscriptions

£10.—Dr. J. H. H. Chataway, Mombasa.

£5 5s.—Dr. H. C. Beck, Salisbury.

£3 3s.—Colonel R. E. U. Newman, Cambridge.

£2 2s.—Dr. J. Appleyard, Shaftesbury; Dr. W. J. Moloney, Assam; Dr. J. A. Pridham, Weymouth.

£2.—Dr. C. P. Thomson, Bihar.

£1 1s.—Major W. Happer, I.M.S.; Colonel P. MacKessack, Bournemouth (2nd donation).

10s. 6d.—Dr. W. P. Richardson, Childe Okeford.

£437 5s. 5d.—Practitioners in Bournemouth Division—per Dr. E. Douglas Granger: Dr. G. J. McFarlane £1 1s.; Dr. O. C. Carter £3 3s.; Dr. J. A. Kendall £1 1s.; Dr. M. B. Scott £5 5s.; Dr. A. Munro £1 1s.; Dr. T. G. Stevens £5 5s.; Dr. D. G. Litherland £2 2s.; Dr. J. Milligan £1 1s.; Dr. F. B. Mulvany £1 1s.; Dr. A. R. Paterson £5; Dr. C. Edwards £1 1s.; Dr. F. M. Robertson £2 2s.; Dr. K. Rogers £3 3s.; Dr. D. A. Hutcheson £10 10s.; Dr. W. E. Hopkins £1 11s. 6d.; Dr. H. I. Marriner £2 2s.; Commander H. C. Arathon £1 1s.; Dr. J. T. M. McDougall £3; Dr. J. H. Burniston £5; Dr. G. B. Thrift £10 10s.; Dr. M. S. Mitchell £1 1s.; Colonel E. Eckersley £1 1s.; Mr. S. G. Luker £1 1s. (2nd donation); Dr. E. A. Duffield £1 1s.; Dr. A. S. Mackie £1 1s.; Mr. H. Morgan Williams £2 2s.; Colonel T. A. O. Langston £1 1s.; Dr. I. Duguid £2 2s.; Dr. W. A. Mills £1 1s.; Dr. C. J. Sandford £3 3s.; Dr. T. R. Aynsley £1 1s.; Dr. C. P. Charles £5 5s.; Major J. Ewing £5 5s.; Dr. W. Johnson Smyth £2; Mr. N. Ross Smith £3 3s.; Dr. C. R. Willans £1 1s.; Dr. G. A. Reid £5 5s.; Mr. J. Sherren £1 1s.; Mr. N. F. Adeney £26 5s.; Dr. W. O. Beddard £1 1s.; Colonel W. R. P. Goodwin £2 2s.; Dr. E. J. Moore £5 5s.; Dr. J. H. Griffiths £2 2s.; Lieut.-Colonel E. A. Chartres £1 1s.; Dr. A. E. Sears £1 1s.; Surgeon Commander W. G. Westcott £5 5s.; Dr. W. McNaughton £3 3s.; Dr. J. G. McK. Grant £2 2s.; Dr. F. C. Bottomley £2 2s.; Dr. T. Robson £2 2s.; Surgeon Rear-Admiral A. Thomas £1 1s.; Major W. Bligh £2 2s. (2nd donation); Dr. E. Osborne £1 1s.; Dr. A. H. Miller £2 2s.; Dr. C. Shaw £2 2s.; Dr. D. Hardie £2 2s.; Dr. H. V. Mitchell £2 2s.; Dr. W. L. Garner £1 1s.; Dr. K. M. Andrew £5 5s.; Dr. J. Y. Walker £5 5s.; Dr. W. M. Bristow £4 4s.; Drs. G. L. Buckley and K. M. Henderson £3 3s.; Dr. I. H. Jenkins £2 2s.; Dr. P. P. McKinney £2 2s.; Dr. R. H. Little £5 5s.; Dr. A. D. Symons £2 2s.; Dr. J. Dixon Green £1 1s.; Dr. E. Bond £1 1s.; Dr. F. J. H. Coutts £1 1s.; Dr. E. T. Walker £1 1s.; Dr. S. Devine £3 3s.; Dr. A. H. Davidson £2 2s.; Dr. F. W. H. Robson £1 1s.; Colonel P. MacKessack £1 1s.; Dr. J. Allison Glover £2 2s.; Dr. C. W. Davies £10 10s.; Dr. A. Stables £1 1s.; Dr. J. W. Nankivell £5 5s.; Dr. A. R. N. MacGillycuddy £1 1s.; Dr. W. R. Pratt £1 1s.; Dr. C. W. Branson £1 1s.; Dr. R. H. Reid £2 2s.; Dr. J. Sharp £3 3s.; Dr. R. S. Bennie £2 2s.; Dr. F. Heasman £5 5s.; Dr. A. M. Ross £1 1s.; Dr. A. M. Barron £1 1s.; Dr. N. MacGillycuddy £1 1s.; Drs. H. J. and K. D. Ball £5 5s.; Dr. G. H. Pitt £5 5s.; Dr. T. M. Bell £1; Dr. S. W. Green £3 3s.; Dr. E. S. Bompas £1 1s.; Dr. A. L. Dobbyn £2 2s.; Dr. E. Burstal £10; Major A. C. Ingram £2; Dr. C. H. D. Bartley £3 3s.; Dr. A. W. Hall £1 1s.; Dr. E. Courtin £1 1s.; Dr. J. Wood £1 1s.; Dr. S. A. Montgomery £1 1s.; Mr. E. Bowden £21; Dr. N. Matthews £5 5s.; Dr. F. Barker £2 2s.; Dr. C. J. Royston £1; Dr. P. J. Montgomery £10 10s.; Dr. C. E. Gautier-Smith £3 3s.; Dr. R. V. Howell £2 2s.; Dr. A. McCall £1 1s.; Mr. C. E. P. Markby £1 1s.; Dr. P. C. Cumber £1 1s.; Dr. C. T. Hawkins £2 2s.; Dr. C. F. Pedley £3; Dr. C. A. Basker £1 1s.; Portion Entertainments Fund £8 8s.; Dr. E. C. Parker Williams £1 1s.; Dr. V. Robinson £1 1s.; Dr. S. F. Durrans £1 1s.; Dr. B. Graves £1 1s.; Dr. F. S. Coleman £1 1s.; Dr. G. W. Hall-Smith £3 3s.; Dr. M. Edwards £1 1s.; Dr. C. H. Osmond £1 1s.; Dr. J. K. Hunter £1 1s.; Dr. F. McDade 10s.; Dr. W. B. Postlethwaite £2 2s.; Dr. J. C. A. Norman and Partners £26 5s.; Dr. S. Watson Smith £10 10s. (2nd dnoation); Colonel H. S. Anderson £1 1s.; Dr. C. B. M. Aldridge £1 1s.; Mr. C. R. Salkeld £1 1s.; Dr. E. C. Adams £1; Dr. K. B. Clarke £1 1s.; Dr. M. Scott £1 1s.; Drs. R. and G. P. Charles £2 2s.; Mr. W. A. Wetherley-Mein £5 5s.; Dr. B. E. Tompson £1 11s. 6d.; Dr. T. B. Batchelor £5; Dr. S. H. Cookson £1 1s.; Lieut.-Colonel W. S. J. Shaw 10s.; Dr. R. O'Dolan £1; Dr. J. L. Reeve £1 1s.; Dr. C. F. Winkfield £1 1s.; Dr. L. Capper-Johnson £1 1s.; Dr. W. H. Nutt £1 1s.; Dr. C. D. Holdsworth £1 1s.; Dr. J. Black-Milne £1; Dr. E. S. Bowes £1; Dr. R. G. Tuke £1 1s.; Dr. P. S. Blaker £1 1s.; Colonel L. Deas 10s.; Dr. A. de W. Snowden £1; Dr. J. H. Bentley £1 1s.; Dr. E. D. Granger £10. (The cost of collection was £9 6s.)

£67 19s. 1d.—Cumberland Division—per Dr. H. C. Maclaren (amount already sent £114 11s. 6d.): Anonymous £1 17s. 6d.; Drs. H. P. Nelson, D. L. Nelson, and A. P. Borrowman £3 3s.; Mr. R. S. Venters £2 2s.; Dr. M. W. C. Watson £2 2s.; Carlisle Insurance Practitioners £58 14s. 7d.

£55 13s.—Members of Somerset Panel Committee (amount already sent £275): Subscribers to the total sum—Dr. G. Carter, Dr. R. A. Condon, Dr. L. Cutler, Lieut.-Colonel H. G. W. Dawson, Dr. H. D. Fleming, Dr. G. L. Lyon-Smith, Dr. A. MacGregor, Dr. A. H. Morris, Dr. A. Pimm, Sir Wm. Savage, Dr. D. V. Hague, Dr. H. M. Halliday, Dr. V. C. Martyn, Dr. K. Anderson, Dr. G. B. Egerton, Dr. M. Gower, Dr. L. Gray, Dr. G. S. Hodge, Dr. E. N. Jupp, Dr. C. M. Marshall, Dr. H. J. Marston, Dr. J. W. Papillon, Dr. L. C. Thorn, Dr. J. T. Wills, Dr. E. Romer, Dr. H. T. M Alford, Dr. R. M. Alford, Mr. J. L. Birkett, Dr. R. J. Buxton (2nd donation), Dr. E. R. Clutterbuck, Dr. A. H. Duckett, Dr. H. E. Gamlen, Dr. N. D. Gerrish, Major J. F. Grant, Dr. A. W. H. Holmes, Colonel A. W. Hooper, Dr. P. T. Jones, Dr. A. B. Kettle, Sir John Macpherson, Dr. P. S. Martin, Dr. E. E. M. Ogilvie, Dr. H. F. Powell, Dr. A. S. Robertson, Dr. A. T. F. Rowley, Dr. J. Wallace, Mr. C. F. Walters, Dr. R. Warren, Colonel C. A. Webb, Dr. M. J. Cooke, Dr. A. E. R. Weaver, Dr. J. V. Blackford, Dr. G. B. Buckley, Dr. E. A. G. Dowling, Dr. C. F. Le Sage, Dr. G. H. Prance, Dr. G. H. R. Harrison, Prof. J. Swain, Colonel R. G. Turner, Dr. H. M. Robson, Dr. R. M. Ainsworth, Dr. E. W. Ashworth, Dr. T. Aubrey, Dr. H. M. Ashworth, Dr. J. Barlow, Dr. L. B. Barlow, Dr. H. A. Bell, Dr. F. Blacklee, Dr. J. E. Bolton, Dr. W. E. Bracey, Dr. S. L. Brimblecombe, Dr. W. P. Brinckman, Dr. J. F. E. Burns, Dr. H. C. Bristowe, Dr. W. H. W. Cheyne, Dr. B. G. H. Christmas, Dr. S. C. Clapham, Dr. D. O. Clark, Dr. J. F. Coates, Dr. P. C. Collyns, Dr. A. B. Creak, Dr. B. A. Crook, Dr. F. R. Daniel, Dr. K. E. D. Dauncey, Dr. A. W. Duncan, Dr. G. E. P. Davis, Dr. J. N. C. Eglinton, Dr. L. E. V. Every-Clayton, Dr. H. J. Eastes, Dr. R. A. Fawcus, Dr. A. H. Finch, Dr. R. T. Finn, Dr. N. Flower, Dr. J. F. P. Forster, Dr. K. Flew, Dr. W. A. Gornall, Dr. D. G. Gower, Dr. J. L. Griffin, Dr. C. C. Harrison, Dr. J. Hewitt, Dr. A. C. Hincks, Dr. F. T. J. Hobday, Dr. R. P. Hosford, Dr. F. W. T. Hughes, Dr. R. G. W. Husbands, Dr. A. W. Hyatt, Dr. G. S. Hodge, Dr. M. H. Harding, Dr. M. J. Ingram, Dr. R. Jackson, Dr. J. S. Kamester, Dr. R. St. J. Kemm, Dr. W. Kirkwood, Dr. A. Lane, Dr. R. Lee-Michell, Dr. G. Macleod, Dr. C. A. Marsh (2nd donation), Dr. B. Martin, Dr. E. R. Matthews, Dr. A. McDonald, Dr. J. C. McMaster, Dr. C. L'O. Miall, Dr. R. S. Millar, Dr. J. M. Mitchell, Dr. G. H. Moorhead, Dr. G. E. Mullins, Dr. W. P. H. Munden, Dr. H. Newsome, Dr. C. J. Nicholson, Dr. J. R. Nicholson-Lailey, Dr. W. J. Petty, Dr. I. E. Phelps, Dr. W. F. Pim, Dr. E. D. Pineo, Dr. G. S. Pollard, Dr. J. C. Parker, Dr. W. H. Randolph, Dr. C. R. S. Jones, Dr. W. S. H. S Sequeira, Dr. M. A. E. Somers, Dr. R. Sutherland, Dr. T. L. H. Shore, Dr. E. R. Thompson, Dr. W. Thompson, Dr. E. M. Tustin, Dr. T. A. F. Tyrrell, Dr. H. R. Unwin, Dr. C. N. Vaisey, Dr. G. A. Valentine, Dr. A. R. Wade, Dr. J. W. Wilcox, Dr. E. R. Willis, Dr. M. V. Wood, Dr. A. H. Wright, Dr. C. Christie, Dr. W. G. Parker, Dr C. H. F. Johnston, Dr. J. N. N. Robinson, Dr. J. Evans, Dr. U. W. Wood, Dr. A. S. Wakely, Dr. J. Pardoe, Dr. P. C. Rankin, Dr. R. G. Bartelot, Dr. P. Burns, Dr. A. Walker, Miss E. K. N. Marsh, Dr. D. Price, Dr. D. Brodie, Dr. J. C. G. Whitelaw, Dr. A. E. Glanvill, Dr. D. Struthers.

£16 4s. 6d.—Public Health and Municipal Hospitals' Staff, Borough of Gateshead—per Dr. James Grant: Dr. J. Grant £3 3s.; Dr. M. Herbst £2 2s.; Dr. S. D. Rowlands £1 1s.; Dr. S. Graham £1; Dr. I. M. Pratt £1 1s.; Dr. L. L. Westrope £3 3s.; Dr. G. G. Sharpe £2 2s.; Dr. G. E. Frances £1 1s.; Dr. A. Heymann £1 1s.; Dr. M. Anderson 10s. 6d.

£7 7s.—Practitioners in Buckinghamshire—per Dr. V. Lloyd Hart (amount already sent £493 6s. 6d.): Drs. Weaver-Adams, Miller, and Robinson £5 5s.: Dr. J. Turnbull £2 2s.

£5 5s.—South Shields Division—per Dr. J. I. Smith (amount already sent £30 9s.): Drs. G. F. Shepherd and R. Raffle.

Practitioners in the area of the Newcastle-upon-Tyne Division—per Mr. Weldon Watts (amount already sent £923 11s.): Dr. G. Hall (2nd donation).

£2 2s.—Practitioners in the area of the Marylebone Division—per Mr. F. MacG. Loughnane (amount already sent £109 7s.): Dr. Russell Brain.

Practitioners in Exeter Division—per Drs. Murray and Paget (amount already sent £223 6s. 6d.): Lieut.-Colonel A. L. Crockford.

Derby Division—per Dr. E. C. Dawson (amount already sent £201 14s. 7d.): Mr. C. D. Lochrane (2nd donation).

£2.—Grimsby Division—per Dr. T. J. T. Wilmot (amount already sent £67 14s.): Dr. W. Escombe.

Local Medical and Panel Committees

£44 2s. 10d.—Ayr County (3rd donation).

£40 3s. 6d.—Newcastle-upon-Tyne.

£25.—West Suffolk (2nd donation).

£17 19s.—Dumbarton County (3rd donation).

Carlisle (acknowledged under Cumberland Division).

Total—£34,437 9*s.* 7*d.* *and* £100 3½% *Conversion Stock, and* £40 3% *Defence Bonds*

CERTIFICATES FOR MILK FOR INVALIDS

The arrangements for the supply of fresh milk on a priority basis to certain classes of invalids have been revised in some important details since the statement published in the *Supplement* of October 4 (p. 73).

Lord Horder, as medical adviser to the Minister of Food, has sent a personal letter to each registered medical practitioner enclosing a confidential statement regarding the issue of medical certificates for the supply of milk on a priority basis under the Milk Supply Scheme. These two documents explain the reasons for the special arrangements and detail the conditions and procedure governing the issue of certificates for liquid milk to persons suffering from any of the prescribed medical conditions.

Under the arrangements as finally agreed, the medical practitioner will insert on the certificate the class number and letter of the medical condition by reference to the confidential statement referred to above. In this form the certificate will preserve in the fullest possible measure the confidential relation-

ship of patient and doctor. The certificate passes direct to the local Food Office, which issues the necessary documents to permit the supply and the purchase of the prescribed quantity of milk for the period authorized.

It is recognized that these arrangements impose upon members of the medical profession sole responsibility for the issue of medical certificates for milk in accordance with the Milk (Scheme of Supply) Order, which gives statutory authority to the arrangements and in accordance with the conditions prescribed by the Minister and circulated to doctors for their confidential use.

Correspondence

Extension of Health Insurance

SIR,—The *British Medical Journal* from time to time publishes letters from doctors criticizing approved societies, and it is unfortunate that some of the doctors who write letters do not always concern themselves with facts. In support of this statement may I draw attention to the letter signed "Observer" in your *Supplement* to the *British Medical Journal* of October 4, 1941. In referring to the extension of National Health Insurance to persons with an income limit of £420 he states: "No one so far seems to have grasped the real crux of the situation, which is a political and financial move by the approved societies to maintain their incomes." And he goes on to say: "This group, earning about £420 per annum, will certainly be made up of men above 45 years of age, whose incidence of disease is found to be high, consequently requiring considerable medical attention. This fact, combined with the loss of the young healthy men at present in the Army, warrants an increased capitation fee."

It may be that the inclusion of this group in National Health Insurance was a political move, but "Observer" is quite wrong in attributing it to the approved societies, and if he will refer to the newspapers and Hansard he will be able to satisfy himself on this point. Further, if "Observer" is right in thinking that the incidence of disease will be found to be high, requiring considerable medical attention, it is a little strange for him to state that the approved societies welcome these members in order to maintain their incomes, for he must know that the illnesses of such members requiring "considerable" medical attention as foreseen by him will result in the payment of "considerable" sickness benefit by the approved societies and the loss to them of "considerable" contributions on account of such sickness.

In fairness to approved societies I hope that when next "Observer" pleads for an increase in the capitation fee he will not couple it with an unwarranted attack upon approved societies.—I am, etc.,

Oct. 13. "ANOTHER OBSERVER."

Mobile Surgeries for Bombed Areas

SIR,—The circular letter of September 30 from the Local Medical and Panel Committee for the County of London shows that a real attempt is being made to continue civilian medical services when surgery premises are rendered untenable by enemy action. The scheme of mutual assistance in loaning premises to unfortunate colleagues deserves the full support of all London practitioners.

It is, however, possible that circumstances may arise when alternative surgery accommodation is not available. A few "travelling surgeries" on the lines of the mobile first-aid vans would seem a practical solution in these conditions. No doubt such an innovation would cause criticism, but since the provision of medical services is of national importance sentiments should be disregarded.

If each practitioner in the London area contributed to a central fund, a small fleet of mobile surgeries could be made available to those members who were unable to find alternative premises immediately. The Government might be induced to contribute to this fund.—I am, etc.,

Welling, Kent, Oct. 7. H. G. HOWITT.

Calling Up of Doctors' Maids

SIR,—Is it not time that the British Medical Association made serious representations to the Government about the need for domestic staff in the houses of medical men? I have been without a house-parlourmaid for over a fortnight, and was seriously considering the advisability of abandoning all attempt to continue practice without such necessary assistance; and I had spared no effort or expense to obtain one, but until to-day without avail. It is surely an undeniable contention that the house of a medical man cannot be maintained without domestic staff. A large proportion of the work done at my private house is essential Government work in connexion with the Forces. Some medical men will soon be compelled to give up practice because of the lack of candidates for domestic situations, and then it will be a serious matter for the Government and the people, and by that time an irremediable disaster. Certain Labour Party members stated in the House of Commons that we should be required to do our own domestic work, and we were to be levelled down to the same home conditions as those of "the working man." We can and shall be levelled down, but on that plane we cannot practise as specialists and had better obtain situations in armament factories; I have been on the verge of doing this.

This, like many other catastrophes of this war, will be realized too late, and something should be done now while there is still time.—I am, etc.,

Gloucester, Oct. 8. C. DE W. GIBB.

*** This matter was the subject of a letter from the B.M.A. to the Ministry of Labour last July (*Supplement*, August 2, p. 18), and the Ministry's reply was published in the *Supplement* of September 27 (p. 70).—ED., *B.M.J.*

Medical Forces of H.M. Services Appointments

ROYAL NAVY

ROYAL NAVAL VOLUNTEER RESERVE

Probationary Temporary Surgeon Lieutenants T. M. Wilson, C. Langmaid, W. A. Walker, G. W. Baker, A. E. S. Wood, P. Goodman, C. C. Gardner, W. R. Henderson, H. S. Hogg, J. D. Bradley-Watson, and P. T. Merlin to be Temporary Surgeon Lieutenants.

ARMY

Major-General A. D. Fraser, D.S.O., M.C., K.H.S., late R.A.M.C., and Major-General (Supernumerary) R. C. Priest, C.B., K.H.P., late R.A.M.C., have retired on retired pay.

Colonel (Acting Major-General) C. M. Finny, O.B.E., K.H.S., late R.A.M.C., to be Major-General.

Colonel (Temporary Brigadier) G. Wilson, O.B.E., M.C., late R.A.M.C., to be Acting Major-General.

Colonel H. C. Winckworth, retired, late R.A.M.C., has reverted to the rank of Lieutenant-Colonel at his own request whilst employed during the present emergency.

Lieut.-Colonels F. D. Annesley, M.C., from R.A.M.C., and C. D. M. Buckley, M.C., from R.A.M.C., to be Colonels.

ROYAL ARMY MEDICAL CORPS

Major (Temporary Lieut.-Colonel) F. R. H. Mollan, M.C., to be Lieutenant-Colonel.

Major G. O. F. Alley, M.C., to be Lieutenant-Colonel.

LAND FORCES: EMERGENCY COMMISSIONS

ROYAL ARMY MEDICAL CORPS

Lieut. H. R. Findlay has relinquished his commission.

ROYAL AIR FORCE

ROYAL AIR FORCE VOLUNTEER RESERVE

To be Squadron Leader: C. A. E. I. Brownlee.

Flight Lieutenant H. Whittle has relinquished his commission on account of ill-health and retains his rank.

Flying Officers H. J. Lillie, C. W. R. Rayne-Davis, R. Robins-Browne, E. L. Ellis, J. Hoadley, F. E. Joules, F. R. Philps, B. A. Stoll, C. F. Wright, C. D. L. Lycett, C. S. Grossmark, R. H. Anthony, P. F. Barwood, F. Constable, P. J. Kelly, D. C. Bodenham, W. A. Steel, T. P. O'Brien, R. G. Blackledge, W. W. A. Gibson, and D. Boyars to be Flight Lieutenants (War Substantive).

Flying Officer R. W. Elliott has relinquished his commission on account of ill-health and retains his rank.

To be Flying Officers (Emergency): T. A. H. Monro, J. D. Anderson, J. A. Elliott, H. J. Fenn, S. Gibson, P. Haslam, A. A. Hill, K. W. B. Rostron, and C. J. P. Seccombe.

To be Flying Officers: E. D. Arkell, J. F. Cartwright, J. P. Dodd, P. G. McE. G. Jones, W. T. S. McKean, C. J. K. Orr, and J. R. Hughes.

DENTAL BRANCH

T. G. Ward, L.R.C.S., L.R.C.P., to be Flying Officer (on probation).

INSURANCE ACTS COMMITTEE OF THE B.M.A.

Election of Direct Representatives for 1941-2

The following direct representatives upon the Insurance Acts Committee have been *elected unopposed* for the groups mentioned:

Group C.—Dr. H. F. Hollis (Leeds).
Dr. W. H. Smailes (Huddersfield).
Group F.—Dr. L. J. Picton (Holmes Chapel, Cheshire).
Group H.—Dr. E. Lewis Lilley (Leicester).
Group I.—Dr. J. A. Brown (Birmingham).
Group J.—Dr. D. J. B. Wilson (High Wycombe, Bucks.
Group L.—Dr. D. O. Twining (Salcombe, Devon).
Group O.—Dr. J. L. McKenzie Brown (Walthamstow).
Dr. C. F. T. Scott (Willesden).
Group P.—Dr. F. Gray (London, S.W.18).
Dr. E. A. Gregg (London, N.W.1).
Group Q.—Dr. S. E. A. Acheson (Belfast).

In the contested groups—namely, A, B, D, E, G, K, M, and N—the results were as follows:

Group A.—Dr. W. Jope (Blantyre, Lanarks). *Elected.*
Dr. W. M. Knox (Glasgow). *Elected.*
Dr. A. F. Wilkie Millar (Edinburgh). *Elected.*
Dr. A. Simpson (Hawick, Roxburghs).
Dr. F. McEwen Sinclair (Glencraig, Fife).
Group B.—Dr. P. V. Anderson (Shildon, Co. Durham). *Elected.*
Dr. T. H. Bates (Newcastle-upon-Tyne).
Group D.—Dr. R. G. McGowan (Manchester). *Elected.*
Dr. F. M. Rose (Preston). *Elected.*
Dr. S. A. Winstanley (Urmston, Lancs). *Elected.*
Dr. A. Campbell (Accrington).
Dr. C. Baxter (Liverpool).
Dr. R. Cranna (Bolton).
Group E.—Dr. J. C. Davies (Wrexham). *Elected.*
Dr. W. E. Thomas (Ystrad-Rhondda). *Elected.*
Dr. C. M. Burrell (Aberystwyth).
Group G.—Dr. J. Hallam (Burslem, Stoke-on-Trent). *Elected.*
Dr. G. E. Elkington (Newport, Shropshire).
Group K.—Dr. J. C. Pearce (Diss, Norfolk). *Elected.*
Dr. C. M. Stevenson (Cambridge).
Group M.—Dr. T. MacCarthy (Sherborne, Dorset). *Elected.*
Dr. G. H. Barendt (Southampton).
Group N.—Dr. A. T. Rogers (Bromley, Kent). *Elected.*
Dr. W. G. Thwaites (Brighton). *Elected.*
Dr. S. A. Forbes (South Croydon).
Dr. N. E. Waterfield (Little Bookham, Surrey).

Scottish Subcommittee

The following direct representatives upon the Insurance Acts Scottish Subcommittee have been *elected unopposed* for the Groups mentioned:

Group A.—Dr. I. M. MacLeod (Inverness).
Group B.—Dr. R. Bruce (Cults, Aberdeenshire).
Group C.—Dr. D. M. McGillivray (Dundee).
Group E.—Dr. J. M. Johnstone (Leven, Fife).
Group F.—Dr. A. F. Wilkie Millar (Edinburgh).
Group G.—Dr. D. Gunn (Loanhead, Midlothian).
Group H.—Dr. J. J. McMillan (Melrose, Roxburghs).
Group I.—Dr. I. D. Grant (Glasgow).
Dr. J. R. Langmuir (Glasgow).
Group J.—Dr. G. MacFeat (Douglas, Lanarks).
Group K.—Dr. W. A. Milne (Greenock).
Group L.—Dr. R. C. Hamilton (Hurlford, Ayrshire).
Group N.—Dr. W. J. Logie (Falkirk).

Nominations for Groups D and M have not been received; the vacancies will be filled by the Insurance Acts Committee.

G. C. ANDERSON,
Secretary.

B.M.A.: Meetings of Branches and Divisions

LANCASHIRE AND CHESHIRE BRANCH: LEIGH DIVISION

At the annual meeting of the Leigh Division, held on October 12, the following officers were elected for 1941-2:

Chairman, Dr. S. H. Ryan. *Vice-Chairman*, Dr. A. Patton. *Honorary Secretary*, Dr. J. H. Young.

The annual report adopted at the meeting stated that although the activities of the Division had been necessarily curtailed owing to the war two meetings had been held during the year as well as two meetings to which all practitioners in the area of the Division were invited. Drs. A. McInnes, G. E. Hayward, and J. H. Young had been appointed medical officers to the Home Guard. The Protection of Practices Scheme had been extended so that a practitioner incapable of work owing to ill-health might receive benefit. Other subjects discussed during the year were private fees, the capitation fee, and medical certification. A suggestion, stated the report, that medical boards should be set up to examine persons desiring a change of occupation was rejected by the Ministry of Labour, Manchester.

B.M.A.: Branch and Division Meetings to be Held

NORTH OF ENGLAND BRANCH.—At Royal Victoria Infirmary, Newcastle-upon-Tyne, Thursday, October 30, at 2.30 p.m., Mr. L. R. Broster, "Some Biological Aspects of War"; 3.45 p.m., resuscitation demonstration by Dr. T. H. Boon and his clinic.

POSTGRADUATE NEWS

The Fellowship of Medicine announces the following postgraduate courses in preparation for the January M.R.C.P. examination: (1) general medicine, King Edward Memorial Hospital, Saturdays, 2 p.m. to 4 p.m., November 22 to December 13 (strictly limited to six postgraduates); (2) West End Hospital for Nervous Diseases course, Tuesdays and Fridays, 2.30 p.m., November 25 to December 19.

A military hospital medical society has arranged a week-end course in war medicine, to be held on Saturday and Sunday, October 25 and 26. On October 25, at 1.45 p.m., following an introductory address by the officer commanding, Colonel A. McKie Reid there will be medical and surgical rounds, a discussion on eye injuries, and an *x*-ray examination. On October 26, at 9.30 a.m., plastic ear, nose, and throat surgery will be considered, there will be a skin demonstration, and a discussion on dyspepsia and gastroscopy. At 2.30 p.m. the programme includes resuscitation, oxygen therapy, anaesthesia in the field, and nutrition in war.

WEEKLY POSTGRADUATE DIARY

BRITISH POSTGRADUATE MEDICAL SCHOOL, Ducane Road, W.—*Daily*, 10 a.m. to 4 p.m., Medical Clinics, Surgical Clinics and Operations, Obstetrical and Gynaecological Clinics and Operations. *Daily*, 1.30 p.m., Post-mortem Demonstrations. *Mon.*, War Surgery of the Chest series commences. *Tues.*, 10 a.m., Paediatric Clinic, Dr. R. Lightwood. 11 a.m., Gynaecological Clinics, Mr. Green-Armytage. *Wed.*, 11.30 a.m., Clinico-pathological Conference (Medical); 2 p.m., Lecture, Haemopoiesis and the Gastro-intestinal Tract (I), Dr. J. W. Clegg. *Thurs.*, 2 p.m., Dermatological Clinic, Dr. R. T. Brain; 2 p.m., Radiological Demonstration, Dr. Duncan White. *Fri.*, 12.15 p.m., Clinico-pathological Conference (Surgical); 2 p.m., Clinico-pathological Conference (Gynaecological); 3 p.m., Sterility Clinic, Mr. V. B. Green-Armytage.

FELLOWSHIP OF MEDICINE AND POSTGRADUATE MEDICAL ASSOCIATION, 1, Wimpole Street, W.—*London Chest Hospital*, Victoria Park, E.: Thurs., 2 p.m., M.R.C.P. Course in Chest Diseases.

GLASGOW UNIVERSITY: DEPARTMENT OF OPHTHALMOLOGY.—At Tennent Institute, Church Street, Glasgow, *Wed.*, 8 p.m. Dr. J. Pendleton White: The Oculist in the Law Courts.

DIARY OF SOCIETIES AND LECTURES

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C.—*Mon.*, 2.30 p.m., Prof. A. J. E. Cave, Surgical Anatomy of the Liver and Bile Ducts. *Tues.*, 2.30 p.m., Mr. R. Davies-Colley, Tumours of the Intestines. *Wed.*, 2.30 p.m., Prof. Cave, Surgical Anatomy of the Kidney and Ureter. *Thurs.*, 2.30 p.m., Mr. C. E. Shattock, Tumours of Bone. *Fri.*, 2.30 p.m., Prof. Cave, Surgical Anatomy of Certain Nerves.

ROYAL SOCIETY OF MEDICINE

Section of Odontology.—Mon., 2.30 p.m., Presidential Address by Mr. Harold Round: The Value of a Dental Department in a General Hospital.

Section of Physical Medicine.—Sat., Meeting at Bath. 12 noon, Demonstration of Cases and Clinical Material at the Royal National Hospital for Rheumatic Diseases; 1.15 p.m., lunch at Foorts Restaurant; 2.15 p.m., Demonstration of Hydrotherapy in the Royal Baths; 3 p.m., Discussion on the Value of Hydrotherapy in Rehabilitation; 4.30 p.m., tea in the Pump Room.

CHADWICK TRUST.—At Royal Sanitary Institute, 90, Buckingham Palace Road, S.W., *Tues.*, 2.30 p.m. Mr. J. C. Dawes (Ministry of Health): The Cleansing of Towns and Cities.

VACANCIES

EXAMINING FACTORY SURGEONS.—The following vacant appointments are announced: Stewarton (Ayrshire); Abercarn (Monmouthshire). Applications to the Chief Inspector of Factories, 28, Broadway, S.W.1, by November 4.

MEDICAL REFEREE UNDER THE WORKMEN'S COMPENSATION ACT, 1925, for the County Court Districts of Downham Market, East Dereham, Fakenham, Holt, King's Lynn, North Walsham, Norwich, Swaffham, Thetford, and Wymondham (Circuit No. 32). Applications to the Under-Secretary of State, Home Office, Industrial Division, Room 37 (III), Cornwall House, Stamford Street, London, S.E.1, by November 4.

APPOINTMENTS

WATERS, H. S., M.B., F.R.C.S., F.R.C.O.G., Major, I.M.S., Professor of Midwifery and Gynaecology, Grant Medical College, Bombay.

WILSON, A. C., M.R.C.S., L.R.C.P., Consulting Psychotherapist to the State Criminal Lunatic Asylum, Broadmoor.